

DEPARTMENT OF THE ARMY HEADQUARTERS U.S. ARMY GARRISON VICENZA UNIT 31401, BOX 80

APO AE 09630

IMEU-VIC-FM SEP 2 1 2005

MEMORANDUM FOR DISTRIBUTION

SUBJECT: U.S. Army Garrison Policy Memorandum 06-35, Private Organization and Informal Fund Fundraiser Policy Letter

1. References:

- a. Joint Ethics Regulation (JER),
- b. Army Europe Regulation 210-22 Private Organizations and Fundraising Policy,
- Army Regulation 210-22 Private Organizations on Army Installations,
- d. Army Regulation 600-20 Army Command Policy,
- e. Army Regulation 600-29 Fund-raising Within the Department of the Army,
- 2. The above listed references govern the approval to conduct fundraising activities by Private Organizations (POs), and Informal Funds. All fundraising activities within the Vicenza and Livorno military communities must comply fully with these regulations.
- 3. Any PO, or Informal Fund wishing to conduct a fundraiser must comply with this policy letter. Organizations must have written approval from the USAG Vicenza Commander or USAG Livorno Commander's designated representative prior to engaging in any fundraiser.
- 4. The approval letter must be maintained at the location of the fundraiser at all times. Fundraisers will be periodically inspected. Those fundraisers that do not have the said approval letter will be closed down.
- 5. It is critical that each organization (POs, and Informal Funds) understands and complies with regulations concerning who may participate in fundraising activities (i.e. soldiers may not participate while in uniform and/or on duty, etc.).
- 6. Only those POs properly registered with the Army and Informal Funds may only conduct fundraisers. Use of DA facilities and equipment in support of fundraising activities is strictly controlled. Organizations must ensure that any necessary approval for use of facilities is obtained prior to proceeding with event planning.

IMEU-VIC-FM

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7. Fundraiser Request Timeline:

- a. Requesting organization official submits the required paperwork (attached fundraiser checklist and supporting documents) to their perspective PO Coordinator no later than 30 days prior to the fundraiser.
- b. PO Coordinator will forward the request to the Staff Judge Advocate (SJA) for a legal review.
- c. Upon receipt of the legal review, the PO Coordinator forwards the request to the DMWR for his/her approval or disapproval.
- d. Upon receipt of the DMWR decision, the PO Coordinator forwards the results in writing to the requesting official.
- 8. An After Action Report must be submitted by the organization to DMWR within 30 days of completion of the fundraiser.

COL, QM

Commanding

9. Point of contact for this action is Stephanie Gibson, Budget Analyst at DSN 634-6710.

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1. Table of Contents

2. Sample Letter Requesting Approval

3. Sample Letter Requesting Permission

4. Sample After Action Review

5. Fundraiser Checklist page 1

6. Fundraiser Checklist page 2

DISTRIBUTION

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TABLE OF CONTENTS

- Page 1 Sample Letter Requesting Approval for Fundraiser
- Page 2 Sample Letter Requesting Permission for Use of Facility
- Page 3 Sample After Action Review
- Page 4 Fundraiser Checklist, page 1
- Page 5 Fundraiser Checklist, page 2

SAMPLE Letter Requesting Fundraiser Approval

Private Organization/Informal Fund Letterhead

MEMORANDUM FOR U.S. Army Garrison Vicenza, FMD (ATTN: PO Coordinator)

SUBJI	ECT: Fundraiser Request					
1.	Request approval to conduct a (type of fundraiser) fundraiser on (dates).					
2.	The "PO/IF NAME".					
3.	The following three persons will supervise and inspect the records at the conclus of the event.					
a.	Person A					
b.	Person B					
c.	Person C					
4.	The purpose of the fundraiser is to support					
5.	One person, who will be utilizing a cash box to collect the money. At the conclusion of the event, the money will be deposited into the "PO/IF NAME" Bank Account.					
6.	Risk Assessment: (e.g., Fire extinguisher will be on hand).					
7.	Disinterested person to: (1) inspect records for proper entering and verification of income and expenditures and to (2) submit written report is:					
8.	Point of Contact is the undersigned					

PO/IF President's Name and Signature

SAMPLE Letter Requesting Use Of A Facility

Private Organization/Informal Fund Letterhead

MEMORANDUM THRU (Facility Manage	er's Name and Address)
MEMORANDUM FOR Commander, U.S. Attn: IMEU-VIC APO AE 09630	Army Garrison Vicenza C-FM, Private Organization Coordinator
SUBJECT: Request for Use of Facility	
	lity and/or specific area, building number, room mes). The (the name of the facility) will be used to
2. POC is () at ().	
	Facility Managers Name and Signature Title

SAMPLE After Action Review

Private Organization/Informal Fund Letterhead

POC:	PO Contact Address Phone Email		
		1.	The "Informal Fund/Private Organization Name" conducted a fundraiser which was on the (DATES, TIMES).
		2.	The "Informal Fund Name/Private Organization" raised \$, after expenses, and deposited these funds into the "IF/PO NAME" bank account. The expenses totaled \$
		3.	ISSUE:
DI	SCUSSION:		
RE	ECOMMEND.	ΑΊ	TION:
			PO/IF President's Name and Signature "PO/IF Organization Name"

REQUEST FOR FUNDRAISER CHECKLIST

PO IF 1. Is the requester an approved Private Organization (PO) or an **Informal Fund?** 2. Is the charitable cause defined within the PO's authorization document? 3. Has a committee of at least three PO or Informal Fund members, who are not office holders, been appointed to supervise the event? 4. Has a disinterested person, who is not an office holder in the PO/Informal Fund, been appointed to inspect the records at the conclusion of the event? 5. Does the request for authorization include the following: a. Name of the PO/Informal Fund? b. Purpose of the fundraiser? c. Name, address & telephone of the persons supervising event? d. Date, time & location of the event? e. Approval for use of the facilities, equipment, etc, included with the request? f. Outline of procedures for the control of funds, etc.? g. Risk assessment/procedures and a copy of the PO's Constitution and By-Laws?

6.	If the follow	event is a raffle, does the request ing:							
	a.	Dates, the sale of tickets, will beg	gin and end?						
	b.	Lists of prizes with the cost of ea	ch?						
	c.	Statement that the requesting Perenough money to pay for the meroprizes?							
	d.	Place or places where the prizes before the drawing, if applicable							
	e.								
	f.	Estimated # of tickets that will b	e sold						
7. If the event is a gambling night, does the request contain the following:									
	a.	The type and number of games t	to be played?						
	b.	The type and denomination of a be used (i.e. chips, etc)?							
	c.	Explanation of the controls, to d losses by individuals?							
d. Statement that participation is limited to U.S. ID card holders and to persons 18 years old or older.									
	IIS IS ‡ ONDUC	# OF FUND RAISERS CTED THIS CALENDAR YEAR.							
PO Coordinator Verification/Disapproval			Date						
\overline{SJ}	A App	proval/Disapproval	Date						